

NOV 14 2018

United States District Court
for
District of New Jersey

AT 8:30 4:26 PM
WILLIAM T. WALSH
CLERK

Request for Modifying the Conditions or Term of Supervision
with Consent of the Offender

(Probation Form 49, Waiver of Hearing is Attached)

Name of Offender: David Hankerson

Cr.: 16-00188-001
FACTS #: 2321963

Name of Sentencing Judicial Officer: THE HONORABLE PETER G. SHERIDAN
UNITED STATES DISTRICT JUDGE

Date of Original Sentence: 11/09/2017

Original Offense: Count 1: 18:922G - Unlawful Transport Of Firearms

Original Sentence: 15 months imprisonment, 36 months supervised release

Special Conditions: Substance Abuse Testing, Drug Treatment, Mental Health Treatment, Life Skills Counseling, Reentry Center-Full-Time, Motor Vehicle Compliance

Type of Supervision: Supervised Release

Date Supervision Commenced: 05/31/2018

PETITIONING THE COURT

☐ To extend the term of supervision for ____ years, for a total term of ____ years.

☒ To modify the conditions of supervision as follows:

RESIDENTIAL REENTRY CENTER PLACEMENT (6 months WITH weekend privileges)

You must reside for a period of 6 months in a community corrections center, halfway house or similar residential facility and must observe all the rules of that facility; no payment required.

CAUSE

At the time of sentencing, Your Honor ordered, as a special condition of his supervised release, that Hankerson reside at the halfway house for 12 months. At this time, we are requesting this condition be modified to six months. While at the halfway house, Hankerson secured full-time employment at Shoprite, attends treatment as scheduled and complaint with the conditions of supervised release.

Respectfully submitted,

By: Amy J. Capozzolo
U.S. Probation Officer

Date: 11/09/2018

THE COURT ORDERS:

- ☐ The Extension of Supervision as Noted Above
- ☒ The Modification of Conditions as Noted Above (as recommended by the Probation Office)
- ☐ No Action
- ☐ Other

Sam M. Dunch

Signature of Judicial Officer

11/14/18

Date

**UNITED STATES DISTRICT COURT
FOR THE
DISTRICT OF NEW JERSEY**

**Waiver of Hearing to Modify Conditions
of Probation/Supervised Release or Extend Term of Supervision**

I have been advised and understand that I am entitled by law to a hearing and assistance of counsel before any unfavorable change may be made in my Conditions of Probation and Supervised Release or my period of supervision being extended. By "assistance of counsel," I understand that I have the right to be represented at the hearing by counsel of my own choosing if I am able to retain counsel. I also understand that I have the right to request the court to appoint counsel to represent me at such a hearing at no cost to myself if I am not able to retain counsel of my own choosing.

I hereby voluntarily waive my statutory right to a hearing and to assistance of counsel. I also agree to the following modification of my Conditions of Probation and Supervised Release or to the proposed extension of my term of supervision:

- ☐ To extend the term of supervision for ____ years, for a total term of ____ years.
- ☒ To modify the conditions of supervision as follows:

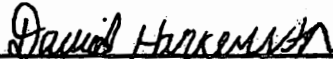
RESIDENTIAL REENTRY CENTER PLACEMENT (6 months WITH weekend privileges)

You must reside for a period of 6 months in a community corrections center, halfway house or similar residential facility and must observe all the rules of that facility. You will be eligible for weekend privileges; no payment required.

Witness:


U.S. Probation Officer
Amy J. Capozzolo

Signed:


Probationer or Supervised Releasee
David Hankerson

11-9-18

Date